Time Frames for External Independent Review

	Standard External Independent Review	Standard External Independent Review for Experimental/Investigational	Expedited External Review	Expedited External Independent Review for Experimental/Investigational
The deadline date for a consumer, authorized representative or health care provider to request an	4 months from the date of the adverse determination or final adverse determination. The request must be in writing.	4 months from the date of the adverse determination or final adverse determination. The request must be in writing.	Immediately: The response may either be oral or in writing.	Promptly: The response may either be oral or in writing
external review	215 ILCS 180/35a	215 ILCS 180/42a	215 ILCS 180/40a(1)	215 ILCS 180/42b(1).
Time frame for the Department of Insurance (DOI) to send a copy of the	1 business day	1 business day	Immediately:	Immediately:
request to the insurer	215 ILCS 180/35a	215 ILCS 180/42c	215 ILCS 180/40b	215 ILCS 180/42b(2)
Time frame for the insurer to review for eligibility, exhaustion or deemed exhaustion of internal appeals and inclusion of all necessary information (the preliminary review)	5 business days 215 ILCS 180/35b	5 business days 215 ILCS 180/42d	Immediately 215 ILCS 180/40b	Immediately 215 ILCS 18042(3)(A)
Time frame for the insurer to notify the	1 business day	1 business day	Immediately	Immediately

DOI and the requestor after completion of the preliminary review	215 ILCS 180/35c	215 ILCS 180/42e	215 ILCS180/40b(1)	215 ILCS 180/42b(3)
Time frame for the DOI to assign an Independent Review Organization (IRO) and notify the IRO, the insurer and the requestor	1 business day 215 ILCS 180/35d(1) and (2)	1 business day 215 ILCS 180/42g(1)(2)	Immediately notify the insurer 215 ILCS 180/40c	Immediately notify the insurer only 215 ILCS 180/42b(5)
Time frame for the requestor to submit additional information to IRO	5 business days 215 ILCS 180/35d(2)	5 business days 215 ILCS 180/42g(2)	Not mentioned	Not mentioned
Time frame for the insurer to submit all information to the IRO	5 business days 215 ILCS 180/35f	5 business days 215 ILCS 180/42i	Immediately, but in no case more than 24 hours 215 ILCS 180/40c(2)	At the time the insurer receives the notice it must transmit all information electronically, by telephone or fax 215 ILCS 180/42b(6)
Time frame for IRO to assign reviewers	Not applicable	1 business day to select one or more reviewers 215 ILCS 180/42h	Not applicable	1 business day to select one of more reviewers 215 ILCS 180/42h
Time frame for assigned clinical reviewers to report decision to IRO	Not applicable	20 business days after being selected by IRO	Not applicable	As expeditiously as possible, but in no event more than 5 calendar days after being selected (If response is oral it

		215 ILCS 180/42I(1)		must be followed up in writing within 48 hours) 215 ILCS 180/42(3)(A)(B)
Time frame for IRO to make a determination after all information is received	Notice must be provided to the DOI, the insurer, the insured and, if applicable, the insured's authorized	Within 20 days after receiving the opinion of each reviewer Notice must be provided to the DOI, the insurer, the insured and, if applicable, the insured's authorized representative 215 ILCS 180/42n(1)(A)	As expeditiously as the medical condition or circumstances require, but in no event more than 72 hours 215 ILCS 180/40e(1)(2)	Within 48 hours after the date the IRO receives the opinion of each reviewer Notice must be provided to the DOI, the insurer, the insured and, if applicable, the insured's authorized representative either orally or in writing. If the notice is provided orally it must be followed up in writing to all concerned individuals and entities within 48 hours. 215 ILCS 180/42n(1)(B)